NORWOOD HEALTH CARE - FDD

1 COO NORMU CHECONUM

1600 NORTH CHESTNUT

MARSHFIELD Phone: (715) 384-2188 Ownership: 54449 County Operated from 1/1 To 12/31 Days of Operation: 365 Highest Level License: FDDs Operate in Conjunction with Hospital? Operate in Conjunction with CBRF? Number of Beds Set Up and Staffed (12/31/02): Title 18 (Medicare) Certified? Total Licensed Bed Capacity (12/31/02): 29 Title 19 (Medicaid) Certified? Yes Number of Residents on 12/31/02: Average Daily Census:

Services Provided to Non-Residents	Age, Sex, and Primary Diagn	Length of Stay (12/31/02) %						
Home Health Care No Supp. Home Care-Personal Care No		 Primary Diagnosis	% Age Groups		%		17.9 14.3	
Supp. Home Care-Household Services	No		85.7	Under 65	100.0		67.9	
Day Services	No	Mental Illness (Org./Psy)	3.6	65 - 74	0.0			
Respite Care	No	Mental Illness (Other)	10.7	75 - 84	0.0		100.0	
Adult Day Care	No	Alcohol & Other Drug Abuse	0.0	85 - 94	0.0	*****************	*****	
Adult Day Health Care No		Para-, Quadra-, Hemiplegic	0.0	95 & Over	0.0	Full-Time Equivalent		
Congregate Meals No		Cancer	0.0			Nursing Staff per 100 Resider		
Home Delivered Meals	No	Fractures	0.0	1	100.0	(12/31/02)		
Other Meals	No	Cardiovascular	0.0	65 & Over	0.0			
Transportation	No	Cerebrovascular	0.0			RNs	7.5	
Referral Service	No	Diabetes	0.0	Sex	8	LPNs	1.9	
Other Services	No	Respiratory	0.0			Nursing Assistants,		
Provide Day Programming for		Other Medical Conditions	0.0	Male	75.0	Aides, & Orderlies	103.0	
Mentally Ill	No			Female	25.0			
Provide Day Programming for			100.0					
Developmentally Disabled Yes					100.0			

Method of Reimbursement

		edicare itle 18			edicaid			Other		P.	rivate Pay			amily Care			anaged Care	! 		
Level of Care	No.	%	Per Diem (\$)	No.	Ŷ	Per Diem (\$)	No.	%	Per Diem (\$)	No.	olo	Per Diem (\$)	No.	୧	Per Diem (\$)	No.	0/0	Per Diem (\$)	Total Resi- dents	of
Int. Skilled Care	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Skilled Care	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Intermediate				0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Limited Care				0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Personal Care				0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Residential Care				0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Dev. Disabled				28	100.0	155	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	28	100.0
Traumatic Brain In	j 0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Ventilator-Depende	nt 0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Total	0	0.0		28	100.0		0	0.0		0	0.0		0	0.0		0	0.0		28	100.0

NORWOOD HEALTH CARE - FDD

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· · · · · · · · · · · · · · · · · · ·		Percent Distribution of Residents' Conditions, Services, and Activities as of 12/31/02										
Deaths During Reporting Period		!										
					% Needing		Total					
Percent Admissions from:		Activities of	8	As	sistance of	% Totally	Number of					
Private Home/No Home Health	0.0	Daily Living (ADL)	Independent	One	Or Two Staff	Dependent	Residents					
Private Home/With Home Health	0.0	Bathing	25.0		32.1	42.9	28					
Other Nursing Homes	0.0	Dressing	53.6		35.7	10.7	28					
Acute Care Hospitals	0.0	Transferring	92.9		7.1	0.0	28					
Psych. HospMR/DD Facilities	100.0	Toilet Use	75.0		21.4	3.6	28					
Rehabilitation Hospitals	0.0		92.9		7.1	0.0	28					
Other Locations	0.0	********	*****	*****	****	******	******					
Total Number of Admissions	5	Continence		8	Special Treatmer	nts	90					
Percent Discharges To:		Indwelling Or Extern	al Catheter	0.0	Receiving Resp	oiratory Care	3.6					
Private Home/No Home Health	0.0	Occ/Freq. Incontinent	t of Bladder	14.3	Receiving Trac	cheostomy Care	0.0					
Private Home/With Home Health	0.0	Occ/Freq. Incontinent	t of Bowel	10.7	Receiving Suct	cioning	0.0					
Other Nursing Homes	16.7				Receiving Osto	omy Care	0.0					
Acute Care Hospitals	16.7	Mobility			Receiving Tube	e Feeding	0.0					
Psych. HospMR/DD Facilities	0.0	Physically Restraine	d	3.6	Receiving Mech	nanically Altered D	iets 57 . 1					
Rehabilitation Hospitals	0.0											
Other Locations	66.7	Skin Care			Other Resident (Characteristics						
Deaths	0.0	With Pressure Sores		0.0	Have Advance I	Directives	0.0					
Total Number of Discharges		With Rashes		17.9	Medications							
(Including Deaths)	6	I			Receiving Psyc	choactive Drugs	75.0					

	This Facility		FDD cilities		All ilties	
	%	%	Ratio	%	Ratio	
Occupancy Rate: Average Daily Census/Licensed Beds	96.6	83.9	1.15	85.1	1.13	
Current Residents from In-County	82.1	38.2	2.15	76.6	1.07	
Admissions from In-County, Still Residing	100.0	18.5	5.39	20.3	4.92	
Admissions/Average Daily Census	17.9	20.3	0.88	133.4	0.13	
Discharges/Average Daily Census	21.4	23.6	0.91	135.3	0.16	
Discharges To Private Residence/Average Daily Census	0.0	9.8	0.00	56.6	0.00	
Residents Receiving Skilled Care	0.0	0.0	0.00	86.3	0.00	
Residents Aged 65 and Older	0.0	15.3	0.00	87.7	0.00	
Title 19 (Medicaid) Funded Residents	100.0	99.2	1.01	67.5	1.48	
Private Pay Funded Residents	0.0	0.6	0.00	21.0	0.00	
Developmentally Disabled Residents	85.7	99.5	0.86	7.1	12.07	
Mentally Ill Residents	14.3	0.4	38.81	33.3	0.43	
General Medical Service Residents	0.0	0.1	0.00	20.5	0.00	
<pre>Impaired ADL (Mean) *</pre>	22.1	54.0	0.41	49.3	0.45	
Psychological Problems	75.0	48.2	1.56	54.0	1.39	
Nursing Care Required (Mean) *	9.8	11.3	0.87	7.2	1.36	